

12 OCT 26 AM 10:57

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Friends of Mazie Hirono

ADDRESS (number and street)

P.O. Box 677

Check if different  
than previously  
reported. (ACC)

Honolulu

HI

96809

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00420760

3. IS THIS  
REPORT

☒

NEW  
(N)

OR

☐

AMENDED  
(A)

HI

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☐ July 15 Quarterly Report (Q2)

☐ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE)

☐ Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

11 / 06 / 2012

in the  
State of

HI

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

/ /

in the  
State of

5. Covering Period

10 / 01 / 2012

through

10 / 17 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Carol Puette

Signature of Treasurer

Carol Puette

*Carol Puette*

Date

10 / 22 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3**  
(Revised 02/2003)